								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO									٠				
Effective October 1, 2003									1350	17			
CLAIMS AS FILED - PART I								L E	NTITY		OTHER		
T7	TAL CLAIMS	···	(Column 1) (Colu			ımn 2)	TYPE			OR	SMALL	ENTITY	
TOTAL CLAIMS			/3					Έ	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/3 minus 20= "		***		X\$ 9	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			<u> </u>		* &-	·	X43	X43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+145	;=		OR	+290=		
* İf	the difference	in column 1 is	less than ze	ss than zero, enter "0" in column 2				٩L		OR	TOTAL .	7.20	
CLAIMS AS AMENDED - PART II										4	OTHER	THAN	
	(Column 1) (Column 2) (Column 3						SMA	LL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		= -	X43:	=		OR	X86=		
	FIRST PRESE	PENDENT	CLAIM		+145	=		OR	+290=				
								AL			TOTAL		
	(Column 1) (Column 2) (Column 3)							EE		,	ADDIT. FEE		
AMENDMENT B		CLAIMS HIGHE REMAINING NUMBI		ST				ADDI-			ADDI-		
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	RATI	=	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Ind pendent	*	Minus	***	<u> </u>	=	X43=			OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+290=	-	
								AL		OP L	TOTAL		
(Column 1) (Column 2) (Column 3)								EE <b>L</b>		JO. 1	ADDIT. FEE		
<u>,                                    </u>	`	CLAIMS	CLAIMS		ST			-1	ADDI-	· .		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT	·	NUMB PREVIO PAID F	USLY	PRESENT :	RATE	:	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		= .	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=	X43=	$\dashv$			X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR	/.50=		
t If the entry in column 1 is less than the entry in column 2 units 50% in column 2										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ODIT. FEE		
1	The "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number f	ound in the	аррі	ropriate box	in colu	ımn 1.		
							_				•		